



Social Connections for Older Adults A Key to Aging Well

May 2026

Public Forum Sponsored by the
Montgomery County Commission on Aging
Summary Report



Department of Health and Human Services

401 Hungerford Drive, 4th Floor, Rockville, Maryland, 20850 240-777-1120

www.montgomerycountymd.gov/senior

TABLE OF CONTENTS

EXECUTIVE SUMMARY	Page 1
OVERVIEW.....	Page 3
KEYNOTE SESSIONS	Page 4
PANEL PRESENTATIONS	Page 5
NEXT STEPS IDENTIFIED	Page 6
APPENDICES	
A. Detailed Agenda & Presentations	Page 9
B. List of Vendors/Exhibitors.....	Page 12
C. Speaker Biographies	Page 13
D. Breakout Session Scenarios.....	Page 17
PHOTOS	Page 21

Photo credit for all photos: Adonis Miller

Executive Summary

The United States is undergoing a historic demographic transformation. Within the next decade, older adults will outnumber children for the first time in the nation's history. Montgomery County is aging even faster than the nation, with more than one in four households now headed by someone aged 65 or older. This shift is increasing demand for housing, healthcare, transportation, and community services while highlighting an equally important public health challenge: social isolation among older adults.

Research demonstrates that social isolation is associated with serious health consequences, including increased risk of heart disease, stroke, dementia, depression, disability, hospitalization, and premature death. Approximately one-third of older adults experience social isolation, and its health impact has been compared to smoking 15 cigarettes per day. At the same time, evidence shows that social connection is a powerful protective factor that improves physical and mental health, supports independence, enhances quality of life, and enables older adults to age successfully in their communities.

To address this growing challenge, the Montgomery County Commission on Aging convened its 2026 Annual Forum, Social Connections for Older Adults: A Key to Aging Well, bringing together residents, healthcare professionals, nonprofit leaders, community organizations, and policymakers to examine how Montgomery County can strengthen opportunities for social connection.



National experts framed the discussion with current research. Dr. Thomas K.M. Cudjoe of Johns Hopkins University described social isolation as a modifiable public health risk factor and urged healthcare providers and communities to identify socially isolated individuals and connect them with effective interventions. Dr. Lona Choi-Allum of AARP presented new national research showing that while most older adults want to remain in

their homes and communities as they age, many lack confidence that their communities can support them. She emphasized that successful aging in place depends not only on affordable housing, healthcare, and transportation, but also on strong social infrastructure.

Two panel discussions translated this research into practice. The first highlighted successful community-based approaches—including Villages, intergenerational programming, and neighborhood partnerships—that build trusted relationships, foster purpose, and reduce isolation. The second demonstrated how culturally and linguistically tailored programs serving African American, Latino, Asian American, and South Asian communities successfully engage older adults through trusted local organizations, faith communities, and culturally responsive outreach. Across all presentations, speakers emphasized that lasting success depends on trusted community leadership, volunteer engagement, sustained investment, and strong partnerships among government, healthcare systems, and non-profit organizations.

Forum participants concluded that Montgomery County already has many effective programs but that significant barriers continue to limit participation. These include limited public awareness, transportation challenges, language and cultural barriers, fragmented access to information, and uneven availability of programs across the County. Participants emphasized that reducing social isolation requires recognizing social connection as a core component of healthy aging rather than simply another social service.

Based on the Forum discussions, the Commission on Aging identified four broad priorities for future advocacy:

(1) expand community-based social connection programs, including Villages, intergenerational initiatives, and culturally responsive partnerships; (2) improve access through better transportation, language services, and easier navigation of available resources; (3) strengthen coordination among County agencies, healthcare providers, non-profit organizations, faith communities, and volunteers; and (4) elevate social connection as a public policy priority by integrating it into County planning, budgeting, and Age-Friendly Montgomery initiatives.



The Forum demonstrated that strengthening social connection is both achievable and essential. By investing in neighborhood-based infrastructure, fostering trusted partnerships, and removing barriers to participation, Montgomery County can reduce social isolation, improve health and well-being, and help more residents age with health, purpose, dignity, and connection.

Overview

The United States is in the midst of a historic demographic shift. Within the next decade, older adults will outnumber children for the first time in the nation's history. Montgomery County, Maryland, is aging even faster than the nation. More than one in four households is now headed by someone aged 65 or older—a proportion that has grown steadily for more than a decade and is reshaping the demand for housing, health care, transportation, and social services.

This demographic transformation is especially significant because a growing body of evidence-based research links social isolation among older adults as a serious health problem. Nationally approximately 31% of older adults experience social isolation—a growing public health challenge associated with health risks comparable to smoking 15 cigarettes a day and estimated to cost the U.S. healthcare system \$2 billion to \$25.2 billion annually in avoidable Medicare spending. Social isolation has been linked to stroke, dementia and cognitive decline, depression, preventable emergency department visits and hospitalizations, and premature mortality.

The encouraging news is that social isolation is not an inevitable consequence of aging. Research demonstrates that meaningful social connections can reduce isolation, improve physical and mental health outcomes, and promote resilience, independence, and a better quality of life. Communities that intentionally foster social connectedness enable older adults to age well and live longer lives with health, purpose, and dignity.

Recognizing both the demographic trends and the growing evidence on the importance of social connection, the Montgomery County Commission on Aging (CoA) convened a public forum focused on the role of social connectedness in aging well. The Forum brought together residents, policymakers, non-profit leaders, healthcare professionals, and community partners to examine how Montgomery County can strengthen opportunities for older adults to remain socially connected. Participants explored the evidence linking social connection with longevity and identified practical strategies to reduce isolation, foster supportive communities, and promote lifelong engagement.

The Forum featured nationally recognized experts in aging research as keynote speakers, moderated panel discussions with community leaders who are successfully implementing evidence-based programs serving diverse older adult populations, and interactive workshops in which participants developed practical recommendations to strengthen social connectedness and support healthy aging throughout Montgomery County. Together, these sessions were designed not only to deepen understanding of the issue but also to identify actionable strategies that can help more Montgomery County residents live to the age of 100 with health, purpose, and dignity.

Keynote sessions

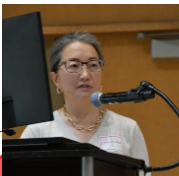
In his keynote presentation, "Unlocking Health and Longevity: The Role of Social Connection," Dr. Thomas K.M. Cudjoe emphasized that social isolation among older adults is a growing public health crisis with profound implications for health, well-being, and healthcare costs. He explained that social isolation—a measurable lack of social contact—is distinct from loneliness, the subjective feeling of being alone, although both are associated with health risks comparable to smoking 15 cigarettes a day. Drawing on current research, Dr. Cudjoe described the links between social isolation and increased rates of heart disease, stroke, dementia, depression, disability, emergency department use, hospitalization, and premature mortality. He stressed that social isolation is a modifiable risk factor and called on healthcare providers, community organizations, and policymakers to adopt an "Educate, Assess, Respond" framework to identify individuals at risk and connect them with evidence-based interventions. His overarching message was that strengthening social connections is not simply a social goal but an essential strategy for improving health, extending longevity, and reducing healthcare costs.

Dr. Lona Choi-Allum presented new findings from AARP research showing that while 75% of adults age 50 and older want to age in their current homes and communities, nearly half (47%) are not confident their communities can meet their future needs. She emphasized that successful aging in place depends not only on affordable housing, healthcare, and transportation, but also on strong opportunities for social connection. AARP's research found that four in ten adults experience loneliness, with persistent loneliness particularly affecting men and people with lower incomes. The primary reasons include shrinking social networks, retirement, widowhood, geographic separation from family and friends, declining participation in community and faith organizations, transportation barriers, and mental health challenges. Although technology can help maintain existing relationships, it cannot replace meaningful in-person connections, and most older adults remain skeptical that AI companions can address loneliness. Dr. Choi-Allum concluded that communities should strengthen social infrastructure by expanding frequent, accessible community programming, partnering with faith and cultural organizations, improving transportation, integrating loneliness screening into healthcare, promoting peer and intergenerational engagement, and measuring progress to ensure communities are better prepared to support healthy aging and social connectedness.



Unlocking Health and Longevity: The role of social connection

Thomas K. M. Cudjoe, MD, MPH, MA
Associate Professor of Medicine
Robert & Jane Meyerhoff Endowed Professor
Division of Geriatric Medicine and Gerontology



AARP

The Escalating Challenge of Loneliness Among Adults 45-Plus

May 28, 2026
Montgomery County Commission on Aging Annual Forum
Silver Spring Civic Center



AARP/RESEARCH © 2026 AARP. ALL RIGHTS RESERVED. AARP RESEARCH

Panel presentations at the Forum

Panel 1: Innovative Programs and Policies that Help Older Adults Connect and Stay Productive. This panel, moderated by Gail Kohn, highlighted three complementary approaches to reducing social isolation and promoting healthy aging: the Village model, intergenerational programming, and community-powered ecosystems. Pazit Aviv described Montgomery County's Villages as grassroots, neighbor-helping-neighbor organizations that strengthen social connections through volunteer-led social activities, practical assistance, service navigation, and friendly outreach, while tailoring programs to the unique needs of each community. Leah Bradley demonstrated how Empowering the Ages creates meaningful relationships between older adults and youth through mentoring, school readiness, and community dialogue programs, noting that research has found a 92% positive impact by providing older adults with purpose and young people with guidance and empathy. Eram Abbasi showed how Baltimore County has expanded culturally responsive Village models by partnering with trusted faith-based and cultural organizations, supporting food and health equity initiatives, assisting with hospital-to-home transitions, and providing dementia-focused outreach. Across all three presentations, speakers emphasized that successful programs are built on trusted local leadership, cultural relevance, volunteer engagement, and long-term investment. The speakers concluded that strengthening neighborhood-based social infrastructure through sustained funding, intergenerational partnerships, technology support, and strong connections between community organizations and healthcare systems is essential to reducing loneliness, fostering purpose, and enabling older adults to age well in their communities.

Panel 2: How Diversity Enhances Social Connections explored how culturally and linguistically tailored approaches can strengthen social connections among diverse older adults. Moderated by Dr. Vernell DeWitty, the panelists described successful models serving African American, Latino, Asian American, and South Asian communities, emphasizing that trust—not programs alone—is the foundation for engagement. Effective strategies included working through trusted community and faith-based organizations, using culturally and linguistically appropriate outreach, offering consistent meeting locations and transportation, and relying on personal referrals and word-of-mouth rather than formal government channels. Panelists noted that language barriers, immigration concerns, mistrust, and lack of awareness often leave older adults socially isolated, making proactive outreach essential. A consistent message across all communities was that successful programs begin with community-identified needs, are co-designed with local organizations, and require sustained funding over multiple years to preserve trust and build lasting relationships. The panel concluded that governments should support and invest in community-led infrastructure while allowing trusted local organizations to remain the primary connection between older adults and the services they need.

Next Steps Identified

The Forum demonstrated that Montgomery County already offers many effective programs that foster social connection among older adults. However, participants consistently identified barriers that limit participation, including limited awareness of available services, transportation challenges, language and cultural barriers, and fragmented access to information and programs. Participants also emphasized that reducing social isolation will require sustained investment in community-based programs, stronger collaboration among public and private partners, and recognition of social connection as a public health priority.

Based on the Forum's findings, the Commission on Aging and relevant committees may wish to refine and advocate for the following priorities:

1. Expand Community-Based Social Connection Programs

Support the continued development and expansion of evidence-informed programs that strengthen social connections, particularly in underserved communities.

Potential strategies include:

- Advocating for sustained funding for Villages, intergenerational programs, culturally responsive initiatives, and faith- and community-based partnerships.
- The expansion of Villages and other community-based programs in East County, Upcounty, and other underserved areas.
- Advocating for community gathering spaces and locally led programs that enable older adults to age in place while remaining socially connected.

2. Improve Access to Programs

Reduce barriers that prevent older adults from participating in available programs.

Potential strategies include:

- Advocating for expanded transportation options through improved coordination among County agencies, non-profit organizations, and community driver networks.
- Ensuring programs are offered in accessible locations with appropriate language interpretation and culturally responsive services.
- Improving County registration and referral systems so residents can more easily identify available programs and be directed to alternative opportunities when programs reach capacity.

3. Strengthen Coordination, Partnerships, and Volunteer Capacity

Improve how older adults learn about, access, and participate in community programs. Potential strategies include:

- Strengthening coordination among County departments, nonprofit organizations, healthcare providers, recreation providers, Villages, faith communities, cultural organizations, schools, and colleges.
- Developing more consistent intake, referral, and navigation processes across Aging and Disability Services.
- Increasing public awareness through coordinated outreach, trusted community messengers, and simplified access to information.
- Strengthening volunteer-based programs through coordinated recruitment, standardized training, thoughtful participant matching, ongoing support, and expanded intergenerational volunteer opportunities.

4. Make Social Connection a Public Policy Priority

Recognize social connection as a fundamental component of healthy aging and incorporate it into County planning, budgeting, and advocacy.

Potential strategies include:

- Aligning the Commission's policy agenda with the Age-Friendly Montgomery initiative and other County efforts to reduce social isolation.
- Meeting with County and state leaders to advocate for policies and investments that support social connection and healthy aging.
- Establishing a cross-sector implementation group to identify best practices, coordinate policy initiatives, develop measurable performance indicators, and regularly evaluate progress.

APPENDICES provide further details about the conference and presentations:

- A. Detailed Agenda & Presentations
- B. List of Vendors/Exhibitors
- C. Speaker Biographies
- D. Breakout Session Scenarios

Appendix A: AGENDA

**MONTGOMERY COUNTY COMMISSION ON AGING
ANNUAL FORUM
MAY 28, 2026
SILVER SPRING CIVIC CENTER**

EXPLORE! DISCOVER! EXAMINE!

SOCIAL CONNECTIONS FOR OLDER ADULTS: A KEY TO AGING WELL

AIM OF THE FORUM

Having social connections is a powerful determinant of longevity and quality of life for older adults. Strong relationships and meaningful engagement improve mental, emotional, and physical well-being while reducing the harmful effects of loneliness and chronic stress.

This Forum will convene residents, policymakers, nonprofit leaders, health professionals, and community partners for a focused conversation on how older adults in Montgomery County can strengthen social connectedness. Participants will examine the evidence linking connection and longevity, and identify practical strategies to reduce isolation, foster healthy environments, and sustain lifelong engagement—so that more Montgomery County residents live to 100 with health, purpose, and dignity.

8:30 AM

REGISTRATION & EXHIBITS HIGHLIGHTING PROGRAMS THAT SUPPORT AGING WELL

9:00 AM

WELCOME & IMPORTANCE OF THE DAY

- Robert Cosby, Montgomery County Commission on Aging
- Linda Bergofsky, Co-Chair, Montgomery County Commission on Aging
- Dr. Patrice McGhee, Chief Aging and Disability Services
- Dr. Kimberly Johnson, Director, Area Agency on Aging
- Councilmember Laurie-Anne Sayles
- Montgomery County Executive Marc Elrich (by video)



9:30 AM – 10:30 AM

EXPLORE & DISCOVER: UNLOCKING HEALTH AND LONGEVITY: THE ROLE OF SOCIAL CONNECTION

Leading experts will share why strong social ties are among the most powerful predictors of longevity. Research consistently shows that people who feel seen, valued, and needed are more likely to thrive physically and emotionally improving both healthspan and lifespan. Learn how programs and policies can intentionally strengthen social connection to improve not only lifespan, how long you live, but also healthspan how long you live in good health, free from chronic disease or disability.

Speaker: Thomas K.M. Cudjoe, MD, MPH, MA, Robert and Jane Meyerhoff Endowed Professorship Associate Professor of Medicine, Division of Geriatric Medicine and Gerontology, Johns Hopkins University School of Medicine

WHAT ARE OLDER ADULTS SAYING ABOUT AGING & SOCIAL CONNECTIONS

Speaker: Lona Choi-Allum, PhD, Senior Research Advisor, Advocacy, Community, & Engagement · AARP Research

EXAMINE: PROGRAMS THAT HELP OLDER ADULTS AGE WITH DIGNITY & PURPOSE

10:30-11:30 AM Innovative Programs & Policies That Help Older Adults Connect & Stay Productive

Hear how programs such as village networks, volunteering opportunities, and intergenerational activities support longevity by helping people stay **purposeful, socially connected, mentally stimulated, physically active, and emotionally fulfilled**.

Speakers:

- Eram Abbasi, Community Services Chief, Baltimore County of Aging
- Pazit Aviv, Village Coordinator, Department of Health and Human Services
- Leah Bradley, Executive Director, Empowering the Ages
- Laurie Pross, Commissioner, Commission on Aging

Moderator: Gail Kohn



11:30-12:30 PM How Diversity Enhances Social Connections

Older adults come from many different cultural, economic, and life backgrounds, and these differences shape how they experience community and connection. This panel will explore how programs designed to strengthen social connections can better reflect and respond to the diversity of older adults. Panelists will discuss barriers such as language, transportation, cultural norms, disability, and trust in institutions, and how these factors influence participation. The conversation will highlight practical strategies for creating inclusive, culturally responsive programs that help ensure all older adults feel welcomed, valued, and connected.

- Yuchi Huang, Asian American Health Initiative's Steering Committee Advisor and Vice Chair
- Ama Lee, Aging Ambassador
- Mayur Mody, Executive Director American Diversity Group
- Mariana Serrani, Senior Manager, Latino Health Initiative

Moderator: Vernell DeWitty, PhD, RN, FAAN

12:30PM – 2:15 PM

DIG IN: LUNCH & WORKSHOP SESSION

(Grab a box lunch and join a workshop)

Participants will move from the morning's ideas to action. Participants will join a workshop that will build on the morning's evidence to develop pragmatic recommendations to strengthen social connections. In the workshop participants will examine current programs and promising innovations, identify gaps, silos, and systemic barriers, and develop realistic, sustainable recommendations to strengthen social connections and to be longevity ready.

Please get a box lunch and go to the room designated by the color of the ticket you received at registration. The workshops will be conducted in the rooms listed below:

- Workshop 1- Yellow ticket: Focus on Health & Wellness
- Workshop 2: Orange ticket: Focus on Social Connections
- Workshop 3: Pink ticket: Focus on Transportation
- Workshop 4: Blue Ticket: Focus on Villages

2:15 PM – 2:45 PM

SUMMARIZE: FROM INSIGHT TO COMMITMENTS

Facilitated discussion and report-outs from breakout sessions, shared themes and priority recommendations, and Identification of next steps and commitments, Robert Cosby, PhD

ADJOURN

Appendix B: List of Vendors/Exhibitors

- Link Generations Programs
- Adult Protective Services
- African-American Health Initiative
- Keeping Seniors Safe
- Respite--Arc of Montgomery
- Montgomery County Villages Consortium
- Department of Transportation
- Montgomery County Family Caregiving
- Aging and Disability Resource Unit
- Department of Recreation
- Asian-American Health Initiative
- Empowering the Ages
- HARP-Habitat for Humanity Metro Maryland & Rebuilding Together
- Montgomery County Home Sharing Program
- Seabury Resources for Aging
- Centenarian interviews video, produced by Julie Petruzzi, Chesapeake Hearing Centers



Appendix C

SPEAKER BIOS BY PANEL

Plenary Panel: Unlocking Health and Longevity: The Role of Social Connections

Lona Choi-Allum is a Senior Research Manager in AARP Research. Her work focuses on fun and fulfillment, including travel, entertainment, events, and social connection, with particular attention to social isolation and loneliness. She has more than 20 years of research experience across academic and non-profit settings, with prior work spanning employment, retirement savings, fraud and scams, and taxpayer satisfaction across AARP and AARP Foundation initiatives. Before joining AARP's national office, she managed federal grants under the National Science Foundation and the National Heart, Lung, and Blood Institute, creating an intergenerational science program for the OASIS senior service organization. She also spent over two years managing a cadre of health volunteers in 16 states in AARP's Health Advocacy Services in the Southeast region office. She holds a doctorate and a master's degree in gerontology from the University of Massachusetts.

Thomas K.M. Cudjoe, M.D., M.P.H., M.A. is the Robert and Jane Meyerhoff Endowed Professor, Associate Professor of Geriatric Medicine and Gerontology at the Johns Hopkins School of Medicine. Dr. Cudjoe is the co-director of Medicine for the Greater Good and the Division of Geriatric Medicine and Gerontology's Director for Community Engagement. He leverages community-based strategies, mixed-methods and human centered design to understand and address social isolation. Dr. Cudjoe is on the Editorial Board of the Journal of the American Geriatrics Society and serves on the Scientific Advisory Council for the Foundation for Social Connection and as the co-lead of the Stakeholder Core for the Johns Hopkins Artificial Intelligence and Technology Collaboratory for Aging Research.

Additionally, he has led studies that examined the prevalence of social isolation among older adults and associations between social isolation and health outcomes. His work has been featured in the New York Times, Wall Street Journal, NPR, and on Good Morning America. He is a Major in the US Army Reserve Corps. Dr. Cudjoe received his undergraduate degree in Cellular and Molecular Biology (summa cum laude) at Hampton University and was active in the Honors College and Army ROTC program. He graduated from Robert Wood Johnson Medical School and earned a master's in public health in health policy at Harvard School of Public Health. He completed his internal medicine residency Internal Medicine at Howard University Hospital and clinical and research fellowship at the Johns Hopkins School of Medicine. In 2023, Dr. Cudjoe completed a master's degree in social design at Maryland Institute College of Art.

Facilitator: **Dr. Robert Cosby** has worked in Health and Human Services for over twenty years and serves as Assistant Dean of Administration, as Associate Professor, and Director of the Howard University Multidisciplinary Gerontology Center located at the Howard University School of Social Work (HUSSW).

Dr. Cosby teaches on a variety of issues involving Social Justice, Welfare Policy, and Healthcare Policy; and Race, Class and Gender. His research interests include Social Isolation and Older Adults; Health and Aging Disparities, and Racism Across the Lifespan; Grandparents Raising Grandchildren, Opioid Use Disorders among Older Adults; Gentrification, Social Isolation and Trauma in Older Adults; the Reintegration of Older Offenders into the Community. He holds Masters Degrees in Social Work (MSW), and Social Science (MPhil); with a concentration in Gerontology from Syracuse University; and a PhD in Social Science with concentration in Gerontology, Social Work and Social Science.

+++++

Panel: Innovative Programs & Policies That Help Older Adults Age with Dignity and Purpose

Eram Abbasi is a dedicated leader in aging services and currently serves as the Chief of Community Services at the Baltimore County Department of Aging. With background in public policy and community-based programming, Eram oversees key initiatives including the Villages of Baltimore County, Dementia Friendly Baltimore County, the Volunteer Center, SHIP, RSVP, and caregiver support programs.

Passionate about equity, inclusion, and aging in place, Eram has led innovative efforts to expand culturally responsive services for older adults across diverse communities thru Villages of Baltimore County. Her work focuses on reducing social isolation, strengthening volunteer engagement, and building sustainable community partnerships. Eram holds a Master's degree in Management of Aging Services and brings over a decade of experience in advancing policies and programs that improve the quality of life for older adults.

Pazit Aviv has worked at Montgomery County Aging and Disability Services as a Village Coordinator since 2014. She consults community organizations on non-profit startups and developments and facilitates the growth of villages in the County. One of her top priorities is capacity building for aging in place in diverse communities. Pazit Aviv holds a Certificate of Nonprofit Management from George Washington University, and a MSW degree from Salem State University with a focus on Aging and end of life care. She lives in Silver Spring, Maryland.

Leah Bradley is Executive Director and Co-Founder of Empowering the Ages. She has extensive experience in the intergenerational field, including providing nationwide training and technical assistance to practitioners establishing intergenerational initiatives. She has visioned, planned and implemented many intergenerational programs throughout the Country. Leah is a licensed social worker, having earned her Master of Social Work degree from the University of Michigan with concentrations in interpersonal practice and gerontology and a Bachelor's of Science from University of Delaware in Family and Community Service.

Laurie Pross: After obtaining her master's degree in health care administration from George Washington University, Laurie has spent her career working in the health care field and volunteering on aging issues. She is a member of the Montgomery County Commission on Aging. She has helped to shape the 2026 Annual Forum. Her passion is working with individuals near the end of their lives, using her death doula certification, including pet therapy, when appropriate.

Panel Facilitator: **Gail Kohn**, founded and led organizations focused on older adults throughout her career 50+ year career. She has been honored many times for her work. She holds a master's degree from George Washington University in health care administration.

+++++

Panel: How Diversity Enhances Social Connections

Ama Lee is a servant leader and community wellness advocate with over a decade of experience supporting older adults, caregivers, and families. She began her work with the African American Health Program (AAHP) more than 11 years ago as a volunteer, serving the community for nine years. During that time, she was also a Peer Educator with American Bone Health, where she introduced the importance of bone health and helped raise awareness around prevention, movement, and healthy aging.

In August 2023, she became an Aging Ambassador, continuing her commitment to service through community-based programming and outreach. Today, her work promotes both bone and brain health, grounded in her belief that what's good for the bones is good for the brain, and that daily habits can improve overall quality of life.

Mayur Mody works with various community-based agencies across Maryland and Virginia to eliminate health disparities, especially among underserved populations. As a first-generation immigrant, Mody has firsthand experience with health disparities where language and cultural barriers hinder access to healthcare services, often leading to preventable health issues.

Mody's background is in health information management and marketing, particularly in how adult consumers process health information so they can make informed decisions based on the information they receive.

Mody began working as a coordinator and later as a Division Administrative Assistant at Holy Cross Health Center. He currently serves as the Executive Director of the American Diversity Group and was appointed to the Advisory Committee for the University of Maryland's Cancer Research Program and Nurse Practitioner Program.

Mariana Serrani, Senior Manager, Latino Health Initiative, Department of Health and Human Services, Montgomery County Government

Mariana is a bilingual public health executive with over 20 years of experience in business operations, the strategic execution of health and human services initiatives, and communications campaigns at the national and international levels across the nonprofit, private, and government sectors.

Mariana joined the Latino Health Initiative in Montgomery County in March 2021 to lead the *“Por Nuestra Salud y Bienestar”* Initiative. Since then, she has advanced into a leadership role within the Latino Health Initiative.

Mariana's mission is to promote culturally and linguistically proficient health and human services to help close the disparity gap faced by Latino communities across the public health spectrum.

Dr. Yuchi Huang is a retired medical devices company senior executive and MBA program professor with a Ph.D. in engineering, and master's degrees in both biophysics and management.

Dr. Huang has been a volunteer with the Chinese Culture and Community Service Center (CCACC) for over 30 years and currently serves as its Board Chair. He is also the Vice Chair of the County's Asian American Health Initiative Steering Committee (AAHI SC), a commissioner of the Commission on Health, and a member of the Healthy Montgomery Steering Committee.

Dr. Huang is very interested in leveraging the time-tested wisdom of the West and the East to make all community members healthier and happier. Being a senior senior-citizen himself, he is naturally partial to senior care.

As one of Montgomery County's largest community-based nonprofits, CCACC operates seven service divisions at four facilities for residents ages 2 to over 100. It offers a wide range of year-round programs tailored to seniors of various interests, ages, and health conditions.

Panel Facilitator: **Vernell P DeWitty, PhD, RN, FAAN**, is a visionary change-maker deeply rooted in health equity, diversity, and community impact. She brings strategic insight, structure, and heart to every initiative— always asking the deeper questions and turning dialogue into direction. Her work bridges academia, public service, and social justice. Through her leadership, advocacy, and innovative approaches, she continues to drive positive changes and create a more inclusive and equitable healthcare system for all. She serves as a Commissioner on the Montgomery County Commission on Aging, and co-chairs the Aging Community Committee.

Appendix D: Breakout Session Scenarios

SCENARIO I: “Waiting for a Chance to Stay Strong”

Margaret Johnson is a 74-year-old resident who lives alone in her community. After a routine medical appointment, her doctor recommended that she join a Bone Builders workshop, explaining that the strength-training program could help improve her balance, strengthen her bones, and reduce her risk of falls. Margaret was eager to participate. She wants to remain independent and continue living safely in her home.

Margaret contacted the local senior center to enroll in the next available class. She was encouraged to hear that the program was popular, but she was disappointed to learn that all the classes were already full. The staff member suggested that she try again next session.

Determined not to give up, Margaret called again the following month when registration opened. Once again, she was told that the classes had filled within hours and that she could be placed on a waiting list. She joined the list but never received a call because no spaces opened.

Over the next several months, Margaret repeated this process. Each time she tried to register, the classes were already at capacity. The waiting list continued to grow, and she remained without access to the program her doctor recommended.

As time passed, Margaret began to feel frustrated and discouraged. She wanted to take an active role in maintaining her health, but the lack of available spaces left her feeling as though there were no realistic options for her. She worried about losing strength and becoming more vulnerable to falls, yet she did not know where else to turn for a similar program.

Margaret’s experience reflects a challenge faced by many older adults in the community: high demand for evidence-based health programs combined with limited program capacity. Without expanded access, additional class offerings, or alternative options, older adults like Margaret may remain motivated to participate but unable to access the services designed to support healthy aging.



SCENARIO II: “A Visit That Never Quite Happens”

James Carter is an 82-year-old man who has lived in the same neighborhood for more than 40 years. After his wife passed away several years ago, he began living alone in the small home they once shared. His two adult children live in other states, and while they call occasionally, visits are infrequent. Most days, James spends his time reading the newspaper, watching television, and tending to a small garden in his backyard. Weeks can pass without him seeing anyone in person.

Recently, a friendly visiting program was launched in his neighborhood to help reduce loneliness and social isolation among older adults. Volunteers were recruited to check in with residents, offer companionship, and provide informal support through regular visits.

A neighbor mentioned the program to James and encouraged him to sign up. At first, he was unsure. James has always valued his independence and privacy. The idea of allowing a stranger into his home made him uncomfortable. He wondered who the volunteers were, whether he would have anything in common with them, and whether the visits would feel awkward.

After some thought, James agreed to give the program a try and was scheduled for a visit. However, the program was still new and did not yet have enough volunteers to meet the growing demand. The first visit was postponed because the volunteer had a scheduling conflict. Another visit was arranged but had to be canceled at the last minute due to a shortage of available volunteers.

After a few missed appointments and rescheduling attempts, James began to feel uncertain about the program. The inconsistency reinforced his hesitation about inviting someone new into his home. He began to think that the effort might not be worth the trouble.

Although the friendly visiting program was created with good intentions—to build connections and support older adults experiencing isolation—James’s experience reflects two common challenges: reluctance among some older adults to accept help from unfamiliar people and limited volunteer capacity to sustain reliable visits. Without consistent outreach and trust-building, individuals like James may remain isolated even when supportive programs exist in their community.



SCENARIO III “Getting There Isn’t So Easy Anymore”

Eleanor Davis is a 79-year-old woman who has lived in her home for more than 30 years. After developing vision problems and slower reaction times, she made the difficult decision to stop driving last year. Although she knows it was the safest choice, losing the ability to drive has made everyday life much more challenging and isolating.

Eleanor has several medical conditions that require regular doctor appointments and occasional trips to the pharmacy. She also needs help getting to the grocery store to buy fresh food. In the past, she relied on driving herself or occasionally asking a neighbor for help, but she does not want to burden others too often. Public transportation is limited in her area, and the nearest bus stop is several blocks away—too far for her to walk safely.

During the winter, the challenges became even greater. The season brought heavy snow and icy conditions, making sidewalks and driveways difficult to navigate. Eleanor is no longer physically able to shovel her driveway or walkway, and few organized services exist in her neighborhood to assist older adults with snow removal. For several days after each storm, her home remained inaccessible because the snow and ice blocked her path to the street.

On one occasion, Eleanor had to cancel an important doctor’s appointment because she could not safely get out of her driveway and no transportation was available. Another time, she delayed a grocery trip for over a week, relying mostly on canned food she had in the pantry.

Although Eleanor wants to remain independent and continue living in her home, the lack of reliable transportation and basic seasonal support services like snow shoveling has made everyday tasks increasingly difficult. Situations like Eleanor’s highlight how transportation barriers and limited community support can affect the health, safety, and independence of older adults aging in place.



SCENARIO IV: “An Idea Without a Roadmap”

Linda Morales and Carol Thompson have been friends and neighbors for more than 25 years. They both live in a community in the eastern part of the county where many residents have aged in place. Over time, they have noticed that more of their neighbors are growing older, living alone, or needing small kinds of help—such as rides to appointments, assistance with errands, or simply someone to check in and share a conversation.

During a recent neighborhood walk, Linda mentioned an idea she had heard about called a “village” model, where neighbors organize to help one another remain independent while building stronger social connections. Carol was immediately interested. They both felt their neighborhood had a strong sense of community and believed many residents would welcome a “neighbor helping neighbor” approach.

Excited by the possibility, Linda and Carol began talking to a few neighbors who responded positively. Some said they would volunteer to help with small tasks like grocery pickups or friendly phone calls. Others expressed interest in participating if a program were created.

However, Linda and Carol quickly realized they did not know where to begin. They were unsure how to organize a village, what structure it should have, or whether it required formal registration or funding. They wondered how to recruit volunteers, manage requests for help, or ensure safety for both volunteers and participants.

Their biggest challenge was access to information and resources. Neither of them knew which local agencies or organizations might provide guidance, training, or startup support. They searched online but found the information overwhelming and unclear about how to apply it to their own neighborhood.

Despite their enthusiasm and the interest, they sensed among neighbors, Linda and Carol felt stuck. They had the motivation and community support, but lacked the knowledge, connections, and resources needed to move forward.

Their situation reflects a common challenge in many communities: residents who are eager to strengthen social connections and mutual support, but who need clearer pathways, technical assistance, and accessible resources to turn a good idea into a sustainable community initiative.





Commissioner Participation



